

reactions to vaccines. The National Vaccine Advisory Committee was established to provide advice and make recommendations to the Director of the National Vaccine Program on matters related to the Program's responsibilities. The Assistant Secretary for Health serves as Director of the National Vaccine Program.

Among the topics to be discussed at the NVAC meeting are: Implementation of the National Vaccine Plan, pertussis, immunizations and health information technology, Healthy People 2020, immunization goals, and vaccine hesitancy. The meeting agenda will be posted on the NVAC Web site: <http://www.hhs.gov/nvpo/nvac> prior to the meeting.

Public attendance at the meeting is limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the National Vaccine Program Office at the address/phone listed above at least one week prior to the meeting. Members of the public will have the opportunity to provide comments at the NVAC meeting during the public comment periods on the agenda. Individuals who would like to submit written statements should email or fax their comments to the National Vaccine Program Office at least five business days prior to the meeting.

Dated: August 21, 2012.

**Bruce Gellin,**

*Director, National Vaccine Program Office,  
Executive Secretary, National Vaccine  
Advisory Committee.*

[FR Doc. 2012-20910 Filed 8-23-12; 8:45 am]

**BILLING CODE 4150-44-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Meetings of the National Biodefense Science Board

**AGENCY:** Department of Health and Human Services, Office of the Secretary.

**ACTION:** Notice.

**SUMMARY:** As stipulated by the Federal Advisory Committee Act, the U.S. Department of Health and Human Services is hereby giving notice that the National Biodefense Science Board (NBSB) will be holding a closed session under exemption 9(B) of the Government in Sunshine Act, 5 U.S.C. section 552b(c).

**DATES:** The closed session of the NBSB will take place on September 17, 2012, and is tentatively scheduled from 1:30 p.m. to 3:30 p.m. EST. The agenda and time for the session are subject to

change as priorities dictate. Please check the NBSB Web site for the most up-to-date information.

**ADDRESSES:** The closed session will be held by teleconference and/or webinar and will not be open to the public as stipulated under exemption 9(B) of the Government in Sunshine Act, 5 U.S.C. section 552b(c).

**FOR FURTHER INFORMATION CONTACT:** The National Biodefense Science Board mailbox: [NBSB@HHS.GOV](mailto:NBSB@HHS.GOV).

**SUPPLEMENTARY INFORMATION:** Pursuant to section 319M of the Public Health Service Act (42 U.S.C. 247d-7f) and section 222 of the Public Health Service Act (42 U.S.C. 217a), the Department of Health and Human Services established the National Biodefense Science Board. The Board shall provide expert advice and guidance to the Secretary on scientific, technical, and other matters of special interest to the Department of Health and Human Services (HHS) regarding current and future chemical, biological, nuclear, and radiological agents, whether naturally occurring, accidental, or deliberate. The Board may also provide advice and guidance to the Secretary and/or the Assistant Secretary for Preparedness and Response (ASPR) on other matters related to public health emergency preparedness and response.

**Background:** The NBSB continues to review and evaluate the 2012 Public Health Emergency Medical Countermeasures Enterprise (PHEMCE) Strategy and Implementation Plan (SIP). Therefore, the Board's deliberations on the PHEMCE SIP task are being conducted in closed sessions in accordance with provisions set forth under exemption 9(B) of the Government in Sunshine Act, 5 U.S.C. section 552b(c), and with approval by the ASPR. For a full description for the basis for closing this session, please see the previous meeting notice published at 77 FR 13129 (2012).

**Availability of Materials:** The meeting agenda and materials will be posted on the NBSB Web site at [www.PHE.GOV/NBSB](http://www.PHE.GOV/NBSB).

**Procedures for Providing Public Input:** All written comments should be sent by email to [NBSB@HHS.GOV](mailto:NBSB@HHS.GOV) with "NBSB Public Comment" as the subject line.

Dated: August 20, 2012.

**Nicole Lurie,**

*Assistant Secretary for Preparedness and Response.*

[FR Doc. 2012-20930 Filed 8-23-12; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[CMS-3258-FN]

### Medicare and Medicaid Programs; Continued Approval of Det Norske Veritas Healthcare's (DNVHC's) Hospital Accreditation Program

**AGENCY:** Centers for Medicare and Medicaid Services, HHS.

**ACTION:** Final notice.

**SUMMARY:** This final notice announces our decision to approve the Det Norske Veritas Healthcare (DNVHC) for continued recognition as a national accrediting organization for hospitals that wish to participate in the Medicare or Medicaid programs. A hospital that participates in Medicaid must also meet the Medicare conditions of participation as referenced in 42 CFR 488.5(3)(b) and 42 CFR 488.6(b). This approval is effective September 26, 2012, through September 26, 2018.

**DATES:** This final notice is effective September 26, 2012, through September 26, 2018.

**FOR FURTHER INFORMATION CONTACT:** Barbara Easterling, (410) 786-0482; Cindy Melanson, (410) 786-0310; or Patricia Chmielewski, (410) 786-6899.

### SUPPLEMENTARY INFORMATION:

#### I. Background

Under the Medicare program, eligible beneficiaries may receive covered services in a hospital provided certain requirements are met. Section 1861(e) of the Social Security Act (the Act) establishes distinct criteria for facilities seeking designation as a hospital. Regulations concerning provider agreements are at 42 CFR part 489 and those pertaining to activities relating to the survey and certification of facilities are at part 488. The regulations at part 482 specify the conditions that a hospital must meet to participate in the Medicare program, the scope of covered services and the conditions for Medicare payment for hospitals.

Generally, to enter into an agreement, a hospital must first be certified by a state survey agency as complying with the conditions or requirements set forth in part 482. Thereafter, the hospital is subject to regular surveys by a state survey agency to determine whether it continues to meet these requirements. However, there is an alternative to surveys by state agencies. Certification by a nationally recognized accreditation program can substitute for ongoing state review.